

**MULTIPLE
DEPENDENT CLAIM
STATEMENT SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/089452

FILING DATE

APPLICANT(S)

CLAIMS

	INDEP.	DEP.	INDEP.	AFTER 2nd AMENDMENT	
				INDEP.	DEP.
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49					
50					
TOTAL IND.	2		2	1	
TOTAL DEP.	53		54		
TOTAL CLAIMS	55		56		

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS